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FACSIMILE TRANSMISSION

DATE: October 14, 2005

TO: EXAMINER LASHANYA NASH

FACSIMILE NO.: 571-273-8300

FROM: John G. Posa

PAGES TRANSMITTED (INCLUDING COVER SHEET): 9

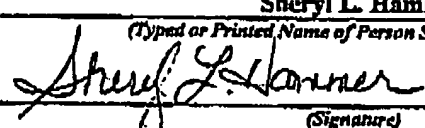
ORIGINAL DOCUMENTS WILL ____ / WILL NOT ☒ FOLLOW BY MAIL

RE: SN 09/877,597

MESSAGE:

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Schwab et al			Docket No. VID-01702/29	
Application No. 09/877,597	Filing Date June 8, 2001	Examiner L. Nash	Group Art Unit 2153	
Invention: SYSTEM FOR TRANSFERRING DESKTOP COMPUTER CONFIGURATION				
<p>I hereby certify that this <u>Amendment, Amendment Transmittal Letter</u> <small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571/273-8300</u>)</p> <p>on <u>Oct. 14, 2005</u> <small>(Date)</small></p> <div style="text-align: right; margin-top: 100px;"> <u>Sheryl L. Hammer</u> <small>(Typed or Printed Name of Person Signing Certificate)</small>  <small>(Signature)</small> </div> <p style="text-align: center; margin-top: 100px;"> Note: Each paper must have its own certificate of mailing. </p>				

OCT 14 2005

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. VID-01702/29	
Applicant(s): Schwab et al						
Application No. 09/877,597	Filing Date 06/08/2001	Examiner L. Nash	Customer No. 25006	Group Art Unit 2153	Confirmation No. 1591	
Invention: SYSTEM FOR TRANSFERRING DESKTOP COMPUTER CONFIGURATION						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	10 -	20 =	0	x \$25.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0	x \$100.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ In the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-1180 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
_____ John G. Posa Reg. No. 37,624 Gifford, Krass, Cron, Sprinkle et al PO Box 7021 Troy, MI 48067-7021 Tel. 734/913-9300			Dated: Oct 14, 2005 <div style="border: 1px solid black; padding: 5px;"> <p>I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p> <p style="text-align: center;">_____ (Date)</p> <p style="text-align: center;">_____ Signature of Person Mailing Correspondence</p> <p style="text-align: center;">VIA FACSIMILE</p> <p style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</p> </div>			
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